DECLARATION	AND POWER OF AT	TORNEYORIGINAL	APPLI	CATION	1	NEY DOCKET		
As below named inventor, I hereby declare: My residence, post office address and citizenship are as stated below next to my name, I verily believe I am the original, first and sole inventor (if only one name is listed below at 201) or an original, first and joint inventor (if plural names are listed below at 201-203) of the subject matter which is claimed and for which a patent is sought on the invention entitled:								
MONOPOLE LOW FREQUENCY TEST WOOFER								
The specification of which was filed on August 3, 1998, as application Serial No. 09/123,400. This application discloses and claims subject matter disclosed in my earlier filed application Serial No. 09123,400 filed August 3, 1998 which was pending on the filing date of this application. I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to above. I acknowledge the duty to disclose information of which I am aware which is material to the examination of this application in accordance with Section 1.56(a), Title 37 of the Code of Federal Regulations; and I hereby claim foreign priority benefits under Title 35, United States Code, §119 of any foreign application(s) for patent or inventor's certificate or of any PCT international application(s) designating at least one country other than the United States of America listed below and have also identified below any foreign applications(s) for patent or inventor's certificate or any PCT international application(s) designating a least one country other than the United States of America filed by me on the same subject matter having a filing date before that of the application(s) of which priority is claimed:								
X no such appli	cations have been filed, or							
such applicat	ions have been filed as follows:		<u> </u>					
COUNTRY	APPLICATION NUMBER	DATE OF FILING (day month year)	C	ATE OF ISSUE day month year)	PRIORITY CLAIN	MED UNDER 35 USC §119		
<u> </u>					YE	S NO		
I hereby claim the benefit under Title 35, United States Code, Sec. §120 of any United States application(s) or PCT international application(s) designating the United States of America that is/are listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in that/those prior applications(s) in the manner provided by the first paragraph of Title 35, United States Code, Sec. §112, I acknowledge the duty to disclose material information as defined in Title 37, Code of Federal Regulations, Sec. §1.56(a) which occurred between the filing date of the prior application(s) and the national or PCT international filing date of this application:								
PRIOR US APPLICATIONS OR PCT INTERNATIONAL APPLICATIONS DESIGNATING THE US FOR BENEFIT UNDER 35USC§120:								
	U.S APPLICATIONS			s ⁻	TATUS (Check or	10)		

U.S APPLICATIONS			STATUS (Check one)		
U.S. APPLICATION NUMBER		U.S. FILING DATE	PATENTED	PENDING	ABANDONED
09/123,400	A	ugust 3, 1998		Х	
PCT APPI	LICATIONS DESIGNATING THE	US			
PCT APPLICATION NO.	PCT FILING DATE	U S SERIAL NUMBERS ASSIGNED (# any)			

POWER OF ATTORNEY: As a named inventor, I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and transact all business in the United States Patent and Trademark Office connected therewith and to act on my behalf before the competent International Authorities in connection with any and all international applications filed by me. (List name and registration number)

Roger L. May, Registration number 26,406 Mark Mollon Registration number 31,123 John L. James, Registration number 28,724

Se	end Corresp	ondence to:		Direct Telephone Calls to:
John L. James			(name and telephone number)	
P. O. Box 2025				
Marietta, GA 30061-2025			John L. James	
			770-792-0360	
			FAX 770-792-0360	
2	FULL NAME OF INVENTOR	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME
٠,		Dage	David	Alan
0	RESIDENCE & CITIZENSHIP	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
	CHZENSKIA	Southfield	Michigan	U.S.A.
4	POST OFFICE ADDRESS	POST OFFICE ADDRESS	CITY	STATE & ZIP CODE/COUNTRY
_	ADDRESS	29300 Brooks Lane	Southfield	Michigan 48034/USA
2	FULL NAME OF INVENTOR	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME
,	RESIDENCE & CITIZENSHIP	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
2	POST OFFICE ADDRESS	POST OFFICE ADDRESS	CITY	STATE & ZIP CODE/COUNTRY
2	FULL NAME OF INVENTOR	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME
,	RESIDENCE & CITIZENSHIP	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
3	POST OFFICE ADDRESS	POST OFFICE ADDRESS	CITY	STATE & ZIP CODE/COUNTRY

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application or any patent issuing thereon.

SIGNATURE OF INVENTOR 201	SIGNATURE OF INVENTOR 202	SIGNATURE OF INVENTOR 203
DATE	DATE	DATE